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EXECUTIVE LO	OBBYING EXPE FORM 507	NDITUR	E REPO	ORT	Ex	ecutiv			tegistre	tion No.	
COVERING JANU	JARY 1 - JUNE 30 <u>, 2006</u>	DUE AUG	UST 15		_			FOR	OFFICE I	TRE ONLY	
	JARY 1 - DECEMBER 31			Y 15				Postor	nark Date 2 / Ø	<u> </u>	٦
Mail to: the Board of Ethic OR Fax to: (225)763-8787 or	cs, 2415 Quail Dr., 3rd F								500	(ve)	
Mallallah	Bru	ce					_	1 2	610	123	
1. Name Wallbillich	<u> </u>	First			ML			ا د) (; <u> </u>	, NO	- \
Lest	5519 Hagerstown Driv	ve. Bator	n Rouge,	Louisia	una.	7081	7_	L			
2. Business Address:_	Surget and No.	<u> </u>	City	State	<u> </u>	Zip					
Mailing Address_	Same as above					- —					
3. Business Phone	225) 324-2269			_							
3. Business France	Area Code and T	elephone Numb	IBF								
(Include expenditu 5. Total of all execut (When Applicable 6. Total of all execut	lve tobbying expenditure ures from Schedules A and l tive lobbying expenditure e) (include expenditures for tive lobbying expenditures	s made July 1 i om Schedules A	through Dec and 8)	ember 31:	\$_N	3.63 A 43.63	_				-
(Lims 4 added to Li	ine 5 should equal Citie by					e= :-b.					<u>:</u> .
7. Did you make an	expenditure exceeding \$	50 on one occa	islon for an e	recutive di	ranch (Official:				13 64	Ì.
From July 1 thr	through June 30? rough December 31?	Yes Yes		No No	H		NA	Ø		2	,
if the answer to	either question in Numb	er 7 above is Y	ES, complete	s Schedule	A and	attach.					
8. Old you make ex	xpenditures exceeding the	e sum of \$250 1	or an execut	ive branch	officia	ali.					
From January 1 From July 1 thro	through June 30? ough December 31?	Yes Yes		No No			ΝA	Ø			
If the answer to	either question in Numb										
9. Did you expend officials were in	i funds for any reception, wited during this reporti	social gathering period?	ng, or other i	function to	which	morê t	hen t	wenty-fl	NS BYCCN	tive brand	n
	Y	es 🗖	N	• 🗹							
if the answer to	o Number 9 above is YES	i, complete Sch	edulie B and	attech.							
			Page 1 o								
Form 507.	Rev. 7/04		3 •								

EXECUTIVE LOBBYING EXPENDITURE REPORT

N. 1		٠		
Ехеси	tive Lo	bbyist Reg	istration No	

10. PROVIDE BELOW (a) the name of the executive branch department as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the department made during the January 1 - June 30 reporting period; (c) the aggregate total expenditures attributable to the department made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the department.

1)	a.	Name of Department: Department of Education	· ···
	b.	Total of all expenditures made January 1 through June 30:	s_843.63
	¢.	Total of all expandibures made July 7 through December 31: (When applicable)	3 N/A
	d.	Total of all expenditures made during the calendar year:	§ 843.63
2)	B.	Name of Department: N/A	
	þ.	Total of all expenditures made January 1 through June 30:	s
	Ç.	Total of all expenditures made July 1 through December 31: (When applicable)	\$
	d.	Total of all expenditures made during the calendar year:	ş_0.00
3)	a.	Name of Department: N/A	
	þ.	Total of all expenditures made January 1 through June 30:	\$
	Ç.	Total of all expenditures made July 1 through December 31: (When applicable)	\$
	d.	Total of all expenditures made during the calendar year:	§ 0.00
schedu the agg	ile; [jreg: ible;	IDE BELOW (a) the name of the executive branch department a b) the aggregate total of all expenditures attributable to the agen ate total of all expenditures attributable to the agency made duri {d} the aggregate total of all expenditures made in a calendar ye	icy made during the January 1 - June 30 reporting period; (c) ng the July 1 - December 31 reporting period when ar attributable to the agency.
1)	a.	Name of Department and Individual Agency: Department of	Education, Earl K. Long Medical Center
		Total of all expenditures made January 1 through June 30:	<u>\$ 344.44</u>
	c.	Total of all expenditures made July 1 through December 31: (When applicable)	\$ N/A
	d.	Total of all expenditures made during the calendar year:	\$_344.44

2)	a. Name of Department and Individual Agency: Department	of Education, University Medical Center
	b. Total of all expenditures made January 1 through June 30:	\$_488.19
	 Total of all expenditures made July 1 through December 31 (When applicable) 	: s N/A
	d. Total of all expenditures made during the calendar year:	<u> </u>
3)	e. Name of Department and Individual Agency: N/A	·
	b. Total of all expenditures made January 1 through June 30:	s
	 c. Total of all expenditurés made July 1 through December 3' (When applicable) 	l: \$
	d. Total of all expenditures made during the calendar year	g 0.00

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist

SCHEDULE A: EXPENDITURES FOR EXECUTIVE BRANCH OFFICIALS

This schedule must be completed if you answered YES to either question 7 or 8 on the Executive Lobbying Expenditure Report. If, during the period January 1 through June 30 or the period July 1 through December 31, you made either a) an expenditure for any executive branch official exceeding \$50 on any one occasion or b) aggregate expenditures exceeding \$250 for any one executive branch official during a reporting period, then you must provide the aggregate total of expenditures made on that individual in that reporting period. NOTE: Report covering July - December is cumulative. You must include reportable expenditures from the first half of the year in Column #3.

	, , , , , , , , , , , , , , , , , , ,				
1. EXECUTIVE OFFICIAL'S NAME	2. OFFICIAL'S AGENCY AS LISTED IN THE EXECUTIVE BRANCH SCHEDULE	3. AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT DIVER 550 ON ONE OCCASION OR MADE EXPENDITURES EXCEÓNIOS 550 BETWEEN JANUARY 1 AND JUNE 30	4, AMOUNT OF EXPENDITURES MADE ON AN OFFICIAL FOR WHOM YOU EITHER SPENT OVER \$50 ON ONE DOCASION OR MADE EXPENDITURES EXCEPTING \$250 BETWEEN JULY 1 AND DECEMBER 31	5. TOTAL OF COLUMNS 3 AND 4	
Jolene Johnson	Earl. K. Long Medical Center	\$104.64		\$104.64	
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